# Congress of the United States Washington, DC 20515

April 28, 2021

The Honorable Rosa DeLauro Chairwoman Subcommittee on Labor, Health and Human Services, Education, and Related Agencies House Committee on Appropriations Washington, DC 20515 The Honorable Tom Cole Ranking Member Subcommittee on Labor, Health and Human Services, Education, and Related Agencies House Committee on Appropriations Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole:

The coronavirus (COVID-19) public health emergency is taking a toll on our constituents' mental well-being and understandably may be stressful for many Americans. We are witnessing how fear and anxiety about a disease can be overwhelming and cause strong emotions in both adults and children.

Congress' Joint Economic Committee released a report in October of 2020 on the coronavirus and how it is worsening America's mental health crisis. A 2020 U.S. Census Bureau survey found that 37% of American adults reported symptoms of anxiety and/or depression disorder, triple the percentage reported in 2019, and a June 2020 Centers for Disease Control and Prevention (CDC) survey found that more than 10% of adults have considered suicide in the past 30 days, more than double the share in 2019. Further, a November 2020 CDC report found that between March 2020 and October 2020 there was a 24% increase nationwide in mental health related emergency room visits among children between the ages of 5 and 11, and a 31% increase among those between 12 and 17, compared with the same period in 2019.

We strongly encourage you, as you work in preparing the FY22 Labor, Health and Human Services, Education, and Related Agencies Appropriations Bill, to fund the following programs that reduce stigma and increase access and availability of mental health services:

#### 1. Community Mental Health Services Block Grant (MHBG) [SAMHSA]

Current Funding Level (FY21): \$757,571,000; Request (FY22): \$1,600,000,000

Purpose of Program: The MHBG awards funding to states to supplement existing and/or new mental health services. Services supported include outpatient treatment for serious mental illnesses, such as schizophrenia and bipolar disorders; supported employment and supported housing; rehabilitation services; crisis stabilization and case management; peer specialist and

consumer-directed services; wraparound services for children and families; jail diversion programs; and services for at-risk populations (e.g. individuals who are homeless, those in rural and frontier areas, military families, and veterans).

Impact of Increased Funding: Increased funding would match the President's FY22 discretionary funding request for the MHBG and builds upon mental health resources included in prior coronavirus funding packages.

## 2. Certified Community Behavioral Health Clinics Expansion Grants [SAMHSA]

Current Funding Level (FY21): \$250,000,000; Request (FY22): \$300,000,000

Purpose of Program: The Excellence in Mental Health and Addiction Treatment Act created an eight state Medicaid demonstration designed to provide intensive community-based mental health and addiction treatment services to low income persons with severe mental illnesses and Opioid Use Disorder through Certified Community Behavioral Health Clinics (CCBHCs).

Impact of Increased Funding: Congress in 2020, opened these grants up to all fifty states. Increased funding will provide organizations across the country an opportunity to dramatically expand access to comprehensive and evidence-based mental health and addiction care by attesting to and offering the required array of services.

# 3. National Institutes of Health [HHS]

Current Funding Level (FY21): \$42,934,000,000; Request (FY22): \$46,111,000,000

Purpose of Program: Continued investments in research will aid in developing rapid, effective treatments for behavioral health disorders and facilitate early identification and intervention. Seeing that mental health and substance use conditions frequently co-occur, the National Institute of Mental Health, National Institute on Drug Abuse and National Institute on Alcohol Abuse must have sufficient funding to realize this ambitious vision of finding cures to these disabling illnesses.

Impact of Increased Funding: The requested increase is equal to the cost of biomedical research inflation.

## 4. Loan Repayment Program for Substance Use Disorder Treatment Workforce [HRSA]

Current Funding Level (FY21): \$16,000,000; Request (FY22): \$25,000,000

Purpose of Program: The Loan Repayment Program for the Substance Use Disorder (SUD) Workforce was authorized by Congress in 2017 to respond to the growing opioid epidemic. The program expands the substance abuse treatment workforce by providing loan repayment for eligible mental and behavioral health professionals working full-time in high-need communities or federally-designated mental health professional shortage areas.

Impact of Increased Funding: According to SAMHSA, an estimated 21.6 million Americans aged 12 or over needed treatment for SUD in 2019, but only about 4.2 million Americans aged 12 or over received any form of treatment. Funding for this loan repayment program would help reduce this significant treatment gap by expanding the supply of qualified mental and behavioral health providers.

We would truly appreciate your continued commitment to mental health by funding these key programs in the FY22 Labor, Health and Human Services, Education, and Related Agencies Appropriations Bill.

Sincerely,

Grace F. Napolitano Member of Congress

Member of Congress

Co-Chair, Mental Health Caucus

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John Katko

Member of Congress

Co-Chair, Mental Health Caucus

# FY22 Napolitano Katko Mental Health Appropriations Letter list of co-signers:

/s/ Emanuel Cleaver, II Member of Congress

/s/ Paul Tonko Member of Congress

/s/ Alan Lowenthal Member of Congress

/s/ Jahana Hayes Member of Congress /s/ Aumua Amata Coleman Radewagen

Member of Congress

/s/ Doris Matsui Member of Congress

/s/ Chellie Pingree Member of Congress

/s/ Sean Casten Member of Congress

/s/ Diana DeGette	/s/ Lucy McBath
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/s/ William R. Keating

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/s/ Donald Norcross

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